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Bib Data Sheet

CONFIRMATION NO. 5699

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|-----------------------------|--|--------------|------------------------|------------------------|
| SERIAL NUMBER<br>10/777,689 | FILING OR 371(c)<br>DATE<br>02/13/2004<br>RULE | CLASS<br>348 | GROUP ART UNIT<br>2621 | ATTORNEY<br>DOCKET NO. |
|-----------------------------|--|--------------|------------------------|------------------------|

**APPLICANTS**

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 Kent Fletcher, Pearl City, HI;

**\*\* CONTINUING DATA \*\*\*\*\*****\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\*****\*\* 05/08/2004**

|                                 |   |                        |                     |                    |                         |
|---------------------------------|---|------------------------|---------------------|--------------------|-------------------------|
| Foreign Priority claimed        | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | STATE OR COUNTRY<br>CA | SHEETS DRAWING<br>3 | TOTAL CLAIMS<br>25 | INDEPENDENT CLAIMS<br>4 |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance |                        |                     |                    |                         |
| Verified and Acknowledged       | Examiner's Signature<br><i>WP</i>   | Initials<br><i>AK</i>  |                     |                    |                         |

**ADDRESS**

Whitney Fletcher  
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**TITLE**

BASECAM: a system for using a camera within a baseball base

|                            |   |   |
|----------------------------|---|---|
| FILING FEE RECEIVED<br>473 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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